## Youth Flag Football Cheerleaders (1<sup>st</sup> & 2<sup>nd</sup> Grade)

## Cost \$25.00 Payment Required at Time of Registration

Player Name\_

Parent/Guardian	Male	Female			Age	Birth date			/	_/
Address  City State Zip	Parent/Guare	dian			Home Phone					
City	Cell Phone				Emergency Phone					
MedicalConditions/Allergies  School Attending  Grade  Would you be will to coach your child's team if needed? Yes No Maybe Employer  Email Address  Youth Shirt Size: s m l Adult: S Med Lg  (7-8) (10-12) (14-16)  Please make checks payable to: Alleghany County Recreation  WAIVER FOR PARTICIPATION BY PARENT/GUARDIAN  We, the parents of the above named candidate for a team position, hereby give our approval to participate in any and all related activities. We assume all risks and hazards incidental to such participation including transportation to and from the activities; and we do hereby waive, release, absolve, indemnify, and agree to hold harmless the Alleghany County Recreation, the Alleghany Youth Football League, the organizers, supervisors, participants, coaches, and referees or their agents for injuries while using county facilities and persons transporting our child to and from activities, for any claim arising out of any injury to our child for any cause.  Name of Family Medical Insurance Plan  PolicyI.D.#	Address									
School Attending Grade	City			State_	Zip					
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	Name of Fan	nily Me	dic	al Insura	nce Plan					
Signature (Parent or Legal Guardian)Date	PolicyI.D.#_									
	Signature (P	arent o	r Le	egal Gua	rdian)				Date	

C/o Alleghany County Recreation 348 S. Main St., P.O. Box 366 Sparta, NC 28675